

P94000071028

Document Number Only

CT Corporation System

Requestor's Name  
660 East Jefferson Street

Address  
Tallahassee, FL 32310 222-1092

City State Zip Phone

CORPORATION(S) NAME

000002829090--6  
-04/05/99-01069-026  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

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99 APR -5 PM 2:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

HFI Real Estate Company, Inc.

- Profit
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DIVISION OF CORPORATION

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: HFI Real Estate Company, Inc.

2. The mailing address of the corporation is: 6350 Gulf of Mexico Dr.  
Longboat Key, FL 34228

3. Date of incorporation/qualification: 9/27/94 Document number: P94000071028

4. The name and address of the current registered agent and office:  
Steven W. Hubbard  
2080 McGregor Boulevard, Third Floor  
Ft. Myers, FL 33901-3419

5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)  
CT Corporation System  
1200 S. Pine Island Road  
Plantation, FL 33324

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The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

*Anthony J. VerKruyse* (Signature of an officer, chairman or vice chairman of the board) 3/22/99 (Date)

Anthony J. VerKruyse, Vice President  
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

*Barbara A. Burke* (Signature of Registered Agent) **BARBARA A. BURKE** 3-31-99 (Date)  
SPECIAL ASSISTANT SECRETARY

If signing on behalf of an entity:  
\_\_\_\_\_  
(Typed or Printed Name) (Capacity)

\*\*\* FILING FEE: \$35.00 \*\*\*